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## FOR LINE NUMBER: PAGE 483 / 1449 SCHEDULE A (FEC Form 3 ) Use separate schedule(s) (check only one) for each category of the ITEMIZED RECEIPTS 11a 11b 11d 11c **Detailed Summary Page** 13a 13b 14 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Bob Schaffer for U.S. Senate Full Name (Last, First, Middle Initial) Date of Receipt Α. Stephanie Hanson Mailing Address PO Box 9295 09 30 2008 Transaction ID: 81012.C44246 City State Zip Code CO 81620 Amount of Each Receipt this Period Avon FEC ID number of contributing C 300.00 federal political committee. Earmarked(Receipt) Name of Employer Retired Occupation Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) Retired 2008 Receipt For: Election Cycle-to-Date ▼ Primary X General 1100.00 Other (specify)▼ Full Name (Last, First, Middle Initial) B. Linda Harbaugh Date of Receipt Mailing Address 2101 Hunt Club Dr. 2008 8 Q 08 Transaction ID: 81012.C44350 City State Zip Code Amount of Each Receipt this Period PΑ 15601 Greensburg FEC ID number of contributing C 250.00 federal political committee. Receipt Name of Employer Occupation Homemaker Limit Increased Due to Opponent's Homemaker Spending (2 U.S.C. 441a(i)/441a-1) 2008 Election Cycle-to-Date ▼ Receipt For: X General Primary 250.00 Other (specify)▼ Full Name (Last, First, Middle Initial) Date of Receipt C. Norman Harbert Mailing Address PO Box 127 0.8 2008 Transaction ID: 81002.C41381 Zip Code City State Amount of Each Receipt this Period <u>Hiram</u> OH FEC ID number of contributing 500.00 C federal political committee. Earmarked(Receipt) Name of Employer Hawk Corporation Occupation Limit Increased Due to Opponent's CEO Spending (2 U.S.C. 441a(i)/441a-1) 2008 Election Cycle-to-Date ▼ Receipt For: X Primary General 500.00 Other (specify) 1050.00 SUBTOTAL of Receipts This Page (optional) .....

TOTAL This Period (last page this line number only) ......